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**TRANSMITTAL
FORM**

Application Serial Number	09/514,865
Filing Date	February 28, 2000
First Named Inventor	Shuber
Group Art Unit	1634
Examiner Name	Sakelaris, S.
Attorney Docket No.	EXT-036
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

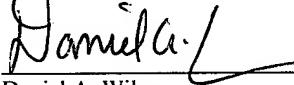
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input checked="" type="checkbox"/> Formal Drawing(s) – 13 sheets	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program	<input type="checkbox"/> Additional Enclosure(s) (please identify below) <input checked="" type="checkbox"/> Transmittal of Formal Drawings
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	

CORRESPONDENCE ADDRESS

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SIGNATURE BLOCK

Date: August 28, 2003
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Respectfully submitted,

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Shuber
SERIAL NO.: 09/514,865 GROUP NO.: 1634
FILING DATE: 2/28/00 EXAMINER: Sakelaris, S.
TITLE: Methods for Disease Detection

Mail Stop Drawings
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL OF FORMAL DRAWINGS

Sir:

Although formal drawings were not required by the Examiner for the above-identified allowed patent application, Applicant voluntarily submits formal drawings herewith. In accordance with instructions provided by an Office of Patent Publication customer service representative (703-305-8594) on August 18, 2003, Applicant submits the formal drawings to Mail Stop Drawings. Thirteen sheets of formal drawings, corresponding to FIGS. 1-10, 11A, 11B, 12, and 13, are included herewith to replace the informal drawings for the above-identified patent application. Applicant respectfully requests that these formal drawings be included in the patent to issue for this allowed patent application.

Respectfully submitted,

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